

ALLOWANCE HOT LIST

Application No. 09/686849 Prepared By C. Desson
Examiner/Tech Ctr Wollerson - 2600 Date 12/12/05

JACKET/ISSUE CLASSIFICATION SHEET:

Primary Examiner's box complete: Yes No N/A
Issuing Classification complete: Yes No N/A

PTO-892/1449:

Examiner's initials or cross-through lines supplied for each item cited by applicant. Yes No N/A

Dates(s) supplied/complete on all PTO-1449/892 forms. (Month and Year required.) Yes No N/A

Brief description of drawings includes description of each figure in drawing.

Yes No N/A

Continuing data mentioned in 1st paragraph. (Can be an insert.)

Yes No N/A

CLAIMS:

Claims listed on Notice of Allowability match allowed claims and/or index of claims. Yes No N/A

Claims correctly numbered in index. (No duplicate, missing or incorrect dependencies.) Yes No N/A

One sheet of complete claims. Yes No N/A

RAM FEES:

____ Amount Charged ____ Amount that should have been charged

CRFE:

If necessary (biological sequence listing) Yes No N/A

Notice Of Allowability:

Either Box No. 5 (drawings accepted) or Box No. 5 (corrected drawing request)
has been checked Yes No N/A

Initialled Bib sheet present. Yes No N/A